

# **PART B - FEE(S) TRANSMITTAL**

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22850 7590 12/11/2008

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(Depositor's name)
(Signature)
(Date)

**CUSTOMER NUMBER**  
**22850**

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10728,937 12/08/2003 Kazuyori Yoshimi 243529US00CONT 8992

**TITLE OF INVENTION:** SAPONIFIED, ALKOXYL GROUP-CONTAINING ETHYLENE-VINYL ACETATE COPOLYMER AND ITS PROCESSED PRODUCTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1510 \$300 \$0 \$1810 03/11/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
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EGWIM, KELECHI CHIDI 1796 524-183000

1. Change of correspondence address or indication of "FEE Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "FEE Address" indication (or "FEE Address" Indication form PTO/SB/47; Rev. 03-02 or more recent) attached. Use of a **Customer Number** is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Oblon, Spivak,  
 2. McClelland, Maier  
 3. & Neustadt, P.C.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for publication as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

KURARAY CO., LTD.

Kurashiki-City, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☐ Advance Order - # of Copies - 0 -

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☒ Payment by credit card. Transmitted via EFS-Web.

☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 15-0030, (enclose an extra copy of this form).

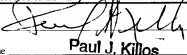
5. **Change in Entity Status** (from status indicated above)

☐ a. Applicant claims **SMALL ENTITY** status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming **SMALL ENTITY** status. See 37 CFR 1.27(g)(2).

**NOTE:** The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

  
**Paul J. Killos**

Date

**MAR 06 2009**

Typed or printed name

Registration No.

**Registration No. 58,014**

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